

## Illinois Department of Revenue

## 2005 Form IL-1120 Corporation Income and Replacement Tax Return

	Due on or before the 15th day of the 3rd month following the close of the	, tax	, your.		
	If this return is not for calendar year 2005, write your fiscal tax year here.  Tax year beginning/, 2005, ending// 20	Write the amount you are paying \$			
	ep 1: Provide the following business information  Write your business name and mailing address.  If you have an address change, check this box.	G	Write your federal employer identification no. (FEIN).		
	Name C/O	Н	Write your Illinois Business Tax number. (IBT).		
	Mailing address  City State ZIP	ı	If you are a member of a group filing a federal consolidated return, write the FEIN of the parent.		
В	Check the box if one of the following apply.  ☐ first return ☐ final return (If final, write the date/)	J	Write the state and zip code where your accounting records are kept. (Use the two-letter postal abbreviate for your state. Ex., IL, GA, etc.)		
С	If this is a final return because you sold this business, write the date sold/, and the new owner's FEIN.	K	State Zip  If you are making the business income election, to treat all nonbusiness income as business income, check here and write "0" on Lines 26 and 34.		
D	Check the box if your business is  Combined return (unitary)  Foreign insurer	L	Check this box if you annualized your income on Form IL-2220. □		
Ε	If you have completed the following federal forms, check the box and <b>attach</b> them to this return.  ☐ Federal Schedule 8886 ☐ Federal Schedule M-3	M	Check your method of accounting.  ☐ Cash ☐ Accrual ☐ Other		
F	Special Apportionment Formulas. If you use a special apportionment formula, mark the appropriate box and see Special Apportionment Formula instructions.  Insurance companies Financial organizations Transportation companies	N	Check the box if you attached Schedule 1299-D, Income Tax Credits.		
► Attach your payment here. ◀	<ol> <li>Federal Taxable Income from U.S. Form 1120, Line 30, or U.S. Form 1120-A, Line 26. Attach a copy of your federal return.</li> <li>Net operating loss deduction from U.S. Form 1120, Line 29a, or U.S. Form 11</li> <li>State, municipal, and other interest income excluded from Line 1.</li> <li>Illinois income and replacement tax deducted in arriving at Line 1.</li> <li>Illinois Bonus Depreciation addition. Attach Form IL-4562.</li> <li>Related Party Expenses additions. Attach Schedule 80/20.</li> <li>Distributive shares of additions. Attach Schedule K-1-P or K-1-T.</li> <li>Other additions. Attach Illinois Schedule M (for IL-1120 filers).</li> <li>Add Lines 1 through 8. This amount is your income or loss.</li> </ol>	20- <i>F</i>	1A, Line 25a. 2		

BD BE DE FI IZ JN LN MC ME NS TG TF TS UB UD UL UM XX AL\_\_\_\_ DR\_\_\_\_ ID\_

10	Write the amount of your income or loss from Line 9.		10	
Ste	o 3: Figure your base income or loss			
11	Federally-taxed refund of Illinois income and replacement tax.	11		
12	Interest income from U.S. Treasury and other exempt federal obligations.			
13	Enterprise Zone Dividend subtraction. <b>Attach</b> Schedule 1299-B.			
14	Enterprise Zone Interest subtraction. Attach Schedule 1299-B.			
15	High Impact Business Dividend subtraction. <b>Attach</b> Schedule 1299-B.			
16	High Impact Business Interest subtraction. <b>Attach</b> Schedule 1299-B.			
17	Contribution subtraction. <b>Attach</b> Schedule 1299-B.			
18	Contributions to certain job training projects (see instructions).			
19	Foreign dividend subtraction. <b>Attach</b> Schedule J.			
20	Illinois Bonus Depreciation subtraction. <b>Attach</b> Schedule IL-4562.			
21	Related-Party Expenses subtraction. <b>Attach</b> Schedule 80/20.			
22	Distributive share of subtractions. <b>Attach</b> Schedule K-1-P or K-1-T.			
23	Other subtractions. <b>Attach</b> Schedule M (for IL-1120 filers).			
24	Total subtractions. Add Lines 11 through 23.	۷۵		1
	Base income or net loss. Subtract Line 24 from Line 10.		24 25	
25	If the amount on Line 25 is derived inside and outside Illinois, co			
27 28 29 30 31 32 33 34 35 36	Non-unitary partnership business income or loss included in Line 25.  Add Lines 26 and 27.  Business income or loss. Subtract Line 28 from Line 25.  Total sales everywhere (this amount cannot be negative).  Total sales inside Illinois (this amount cannot be negative).  Apportionment Factor. Divide Line 31 by Line 30 (carry to six decimal places).  Business income or loss apportionable to Illinois. Multiply Line 29 by Line 3  Nonbusiness income or loss allocable to Illinois. Attach Schedule NB.  Non-unitary partnership business income or loss apportionable to Illinois.  Base income or net loss allocable to Illinois. Add Lines 33 through 35.	30 31 32	28	
Sto	o 5: Figure your not income			
	p 5: Figure your net income		27	1
37	Base income or net loss from Step 3, Line 25, or Step 4, Line 36.		37	
38	Illinois net loss deduction. <b>Attach</b> Schedule NLD or UB/NLD.		38	1
20	If Line 37 is zero or a negative amount, write "0."			
39	Net income. Subtract Line 38 from Line 37.		39	
Ste	p 6: Figure your net replacement tax			
40	Replacement Tax. Multiply Line 39 by 2.5% (.025).		40	
41	Recapture of investment credits. Attach Schedule 4255.		41	
42	Replacement Tax before credits. Add Lines 40 and 41.		42	
43	Investment credits. Attach Form IL-477.		43	
44	Net replacement tax. Subtract Line 43 from Line 42. If the amount is negar	tive, write "0".	44	1

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.5 Inc .6 Re .7 Inc .8 Inc	ecapture of investment credits. Attach Schedule 4255.				
16 Re 17 Inc 18 Inc					
7 Inc 8 Inc	capture of investment credits. Attach Schedule 4255.			45	
7 Inc 8 Inc				46	
	come tax before credits. Add Lines 45 and 46.			47	
9 Ne	Income tax credits. Attach Schedule 1299-D.			48	
	et income tax. Subtract Line 48 from Line 47. If the amou	unt is negative, write	e "0".	49	
ep 8	: Figure your refund or balance due				
<b>0</b> Ne	et replacement tax from Line 44.			50	
<b>1</b> Ne	et income tax from Line 49.			51	
2 To	tal net income and replacement taxes. Add Lines 50 a		52	[	
<b>3</b> Se	elf-assessed penalties. Attach Form IL-2220 (see instruc	ctions).		53	
<b>4</b> Ad	ld Lines 52 and 53.			54	
<b>5</b> Pa	yments.				
а	Credit from 2004 overpayment.		a		
b	Total estimated payments.		b		
С	Form IL-505-B (extension) payment.		c		
<b>6</b> To	tal payments. Add Lines 55a through 55c.			56	
7 Ov	verpayment. If Line 56 is greater than Line 54, subtract I	Line 54 from Line 56	6.	57	
<b>8</b> An	nount to be credited to 2006.			58	
9 Re	efund. Subtract Line 58 from Line 57. This is the amou	nt to be refunded.		59	
0 Ta	x due. If Line 54 is greater than Line 56, subtract Line 50				
Th	is is the amount you owe.			60	

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